PTO/SB/17 (12-04v2)
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| Reduction Act of 1995, no person are require | | | | | ed to respond to a collection of information unless it displays a valid OMB control nur | | | | |
|---|----------------------|-------------------|----------------------|---------|---|---------------------------------------|---------------------------|--------------|-----------|
| Effective on 12/08/2004. | | | | | Complete if Known | | | | |
| Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). | | | | | Application Nun | nber | 10/695,742-Conf. #6192 | | |
| FEE TRANSMITTAL | | | | | Filing Date | | October 30, 2003 | | |
| For FY 2005 | | | | | First Named Inv | | Shigetaka KINME | | |
| | | | | | Examiner Name | · · · · · · · · · · · · · · · · · · · | | | |
| Applicant claims small entity status. See 37 CFR 1.27 | | | | | Art Unit 3679 | | | | |
| TOTAL AMOUNT OF PAYMENT (\$) 910.00 | | | | | Attorney Docket | t No. 1560-0400P | | | |
| METHOD OF PAYMENT (check all that apply) | | | | | | | | | |
| x Check Credit Card Money Order None Other (please identify): | | | | | | | | | |
| Deposit Account Deposit Account Number: 02-2448 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP | | | | | | | | | |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) | | | | | | | | | |
| Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee | | | | | | | | | |
| Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 | | | | | | | | | |
| FEE CALCULATION | | | | | | | | | |
| 1. BASIC FILING, SEARCH, AND EXAMINATION FEES | | | | | | | | | |
| | | FILIN | NG FEES Small Entity | SEA | RCH FEES Small Entity | EXAMI | NATION FEES Small Entity | | |
| Application T | <u>ype</u> <u>Fe</u> |) (\$) | | Fee (\$ | | <u>Fee (\$)</u> | Fee (\$) | Fees F | Paid (\$) |
| Utility | 3 | 00 | 150 | 500 | 250 | 200 | 100 | | |
| Design | 2 | 00 | 100 | 100 | 50 | 130 | 65 | | |
| Plant | 2 | 00 | 100 | 300 | 150 | 160 | 80 | | |
| Reissue | 3 | 00 | 150 | 500 | 250 | 600 | 300 | | |
| Provisional | 2 | 00 | 100 | 0 | 0 | 0 | 0 | | |
| 2. EXCESS CLAIM FEES Small Entity | | | | | | | | | |
| ree Description | | | | | | | | | Fee (\$) |
| Each claim over 20 (including Reissues) | | | | | | | | 200 | 25 100 |
| Each independent claim over 3 (including Reissues) Multiple dependent claims | | | | | | | | 360 | 180 |
| | | | | | | | | | |
| Total Claims Extra Claims Fee (\$) Fee F 9 -20 = x = | | | | | αια (ψ) | | | Fee Paid (\$ | |
| | | - ^ - | | | | | | | |
| Indep. Claims | Extra Claim | <u> </u> | Fee (\$) | Fee P | aid (\$) | | | | |
| | -3= | _ × _ | | | | | | | |
| 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer | | | | | | | | | |
| listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). | | | | | | | | | |
| Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) | | | | | | | | | |
| - 100 = /50 (round up to a whole number) x = | | | | | | | | | |
| 4. OTHER FEE(S) Fees Paid (\$) | | | | | | | | | |
| Non-English Specification, \$130 fee (no-small entity discount) Other (a.g., lete 5line symboles) 4804 Request for continued examination (RCE) (see 37 790.00 | | | | | | | | | |
| Other (e.g., late filing surcharge): 1801 Request for continued examination (RCE) (see 37 790.00 120.00 120.00 | | | | | | | | | |
| SUBMITTED BY | 111111 | | | | | | | | |
| Signature | MILIA | | | | Registration No. (Attorney/Agent) | 29,680 | Telephone | (703) 205 | 5-8000 |
| Name (Print/Type) Michael K. Mutter | | | | | | - | Date | June 9, | 2006 |
| | | | | | | | | | |